

ISSUE SLIP STAPLE AREA (for additional cross references)

POST N	INITIALS	ID NO.	DATE
	SF		11-29-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	15	32	12/6
FORMALITY REVIEW	BE	TC3-883	12-10-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
1	3/1/01
2	3/1/01
3	3/1/01
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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